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> DATE DHE 11/07/0007

10/050,400	01/15/2002	Dennis J. Michaelson	STES104	7667
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
		L	11/07/2007	(Date)
			/JULIE L. O'TYSON/	(Signature)
			JULIE L. O'TYSON	(Depositor's name)

PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE

TITLE OF INVENTION: STERLIZATION APPRATUS FOR ORTHODONTIC BANDS

ISSUE FEE DUE

SMALL ENTITY

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EXAMIN	ER	ART UNIT	CLASS-SUBC	LASS				
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1. Change of correspondence address or indication of "Fee Address"			2. For printing on the patent front page, list					
(37 CFR 1.363).  Change of correspondence address (or Change of			<ol> <li>the names of up to 3 attorneys or agents OR,</li> </ol>		1 FRANK J. DY	1 FRANK J. DYKAS		
Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		C 2 STEDHEN M	2 STEPHEN M. NIPPER		
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					Dykas, Shav	3 Dykas, Shaver & Nipper, LLP		
3. ASSIGNEE NAME AND	RESIDENCE DATA	TO BE PRINTED O	N THE PATENT(print or	type)				
PLEASE NOTE: Unless a filed for recordation as se	n assigneee is identit forth in 37 CFR 3.1	ied below, no assignee 1. Completion of this:	data will appear on the p form is NOT a substitute	atent. If an assignee is id for filing an assignment.	entified below, the d	ocument has been		
(A) NAME OF ASSIGNE	E	(	B) RESIDENCE: (CITY a	and STATE OR COUNT	RY)			
Please check the appropriate ass  4a. The following fee(s) are  K Issue Fee		4b. Pa	the patent): Individual yment of Fee(s): (Please i A check is enclosed.	Corporation or other	1 2 1	Government hown above)		
Dublication Fee (No s	mall entity discount	permitted)	Payment by credit card. I	Form PTO-2038 is attach	ed.			
Advance Order - # of	Copies		The Director is hereby at erpayment to Deposit Acc			ficiency, or credit any n extra copy of this		
5. Change in Entity Status	(from status indicate	ed above)						
a. Applicant claims S	MALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no le	onger claiming SMALL E	NTITY status. See 3	7 CFR 1.27(g)(2).		
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